# 

# FEC FORM 2 STATEMENT OF CANDIDACY

SECRETARY OF THE SENATE
PUBLIC RECORDS

2018 MAR -7 PM 3:32

FEC FORM 2 (REV. 02/2009)

1.	(a) Name of Candidate (in full)										
_	Whitehouse, Sheldon, , ,										
	(b) Address (number and street) P.O. Box 40280	□Che	ck if addres	ss change	ď	2. Candida S6RI0	ate's FEC I 0221	dentifi	cation N	umber	
	(c) City, State, and ZIP Code					3. Is Thi	s 🗖	New			Amended
	Providence		RI	029	40	Stater	nent	(N)	OR	×	(A)
4.	Party Affiliation	5. Office Sought			6. State & Dis	trict of Candi	date				
_	DEMOCRATIC PARTY	Senate			RI						
	DE	SIGNATION	OF PRI	NCIPA	L CAMPAIG	и соми	ITTEE			•	
7.	I hereby designate the following na	med political comi	mittee as m	y Principa	I Campaign Com		2018 (vear of e	election	_ election	n(s).	
	NOTE: This designation should be	filed with the appr	opriate offic	e listed in	the instructions.				,		
	(a) Name of Committee (in full)										
	Whitehouse for Sen	ate									
	(b) Address (number and street) PO Box 40280										
	(c) City, State, and ZIP Code	· · ·									
	Providence				RI	02940	ס				
8.	I hereby authorize the following nar candidacy.  NOTE: This designation should be to the control of the control	med committee, w	hich is NO	「my princ			eceive and	expen	nd funds	on beh	nalf of my
_	(a) Name of Committee (in full)			_							
	Rhode Island Victor	y Fund 201	8								
	(b) Address (number and street) 124 Washington Street			·							
	Suite 101										
_	(c) City, State, and ZIP Code					<u> </u>					
	Foxboro				MA	02035	i				
	I certify that I have exa	amined this Staten	nent and to	the best o	of my knowledge a	and belief it is	s true, corr	ect and	d comple	ete.	
	gnature of Candidate					Date					
<b>.</b> ,		me	_				3/5	18	3		
N.	OTE: Submission of false, erroneous	, or incomplete inf	ormation m	nay subjec	t the person signi	ing this State	ment to pe	nalties	of 2 U.S	S.C. §4	37g.

FEC Form 2S (Revised 02/2017)

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### Optional Supplemental Page for Designation of Additional Authorized Committees

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#### **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives)

8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)  Rhode Island Pennsylvania Victory Fund							
	(c) City, State, and ZIP Code							
	Washington	DC	20003					
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)	<del></del> .						
	Senate Victory 2018							
	(b) Address (number and street) 918 Pennsylvania Ave SE							
	(c) City, State, and ZIP Code			···				
	Washington	DC	20003					
8.	I hereby authorize the following named committee, which is I candidacy. NOTE: This designation should be filed with the particle.  (a) Name of Committee (in full)  Rhode Island Minnesota Victory Fund  (b) Address (number and street) 918 Pennsylvania Ave SE			ehalf of my				
	(c) City, State, and ZIP Code							
	Washington	DC	20003					
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.  (a) Name of Committee (in full)							
	Rhode Island Senate Victory 2018							
	(b) Address (number and street) 120 Maryland Ave NE		`					
	(c) City, State, and ZIP Code	<u>.</u>		· <u>- · · · · · · · · · · · · · · · · · ·</u>				
	Washington	DC	20002					

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

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## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)  Cantwell-Whitehouse Victory Fund							
	(c) City, State, and ZIP Code  Seattle  WA 98104							
8.	3. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds o candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.	n behalf of my						
	(a) Name of Committee (in full)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
8.	3. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds o candidacy. NOTE: This designation should be filed with the principal campaign committee.  (a) Name of Committee (in full)	n behalf of my						
	(a) Name of Committee (in tun)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							

# Faxed or Hand Delivered

HART SENATE OFFICE BUILDING SUITE 232

#### United States Senate

OFFICE OF THE SECRETARY

WASHINGTION, DC 20510-7116

PHONE(202) 224-0322

OFFICE OF PUBLIC RECORDS

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